Example^a

5/3

Initial Notification of Applicability^b

REC'D

National Emission Standards for Hazardous Air Pollutants: Stationary Reciprocating Internal Combustion Engines AUG 3 0 2010 APCO

40 CFR Part 63 Subpart ZZZZ

X Yes, I am subject to 40 CFR Part 63 subpart ZZZZ National Emission Standards for

Hazardous Air Pollutants for Stationary Reciprocating Internal Combustion Engines NAICS code(s): 221112 Compliance Date: X Existing source: May 3, 2013 New/reconstructed source: upon initial startup Note: The May 3, 2013 compliance date for existing sources applies to the following engine types: Existing non-emergency CI stationary RICE with a site rating of more than 500 brake HP located at a major source of HAP emissions Existing stationary CI RICE with a site rating of less than or equal to 500 brake HP located at a major source of **HAP** emissions Existing stationary CI RICE located at an area source of HAP emissions Company name: CITY OF RUSSELL Facility name (if different): RUSSELL MUNICIPAL POWER PLANT Facility (physical location) address: 823 NORTH ELM, AND 11TH STREET AND FRONT STREET IN RUSSELL, KANSAS. My facility is a (please choose one): Major source X Area source Synthetic minor 2-NORDBERG 5100 HORSEPOWER DUAL-FUEL USING #2 DIESEL AND NATURAL GAS-CI 1-NORDBERG 4900 HORSEPOWER DUAL-FUEL USING #2 DIESEL AND NATURAL GAS-CI 2-GM EMD 3600 HORSEPOWER DIESEL USING #2 DIESEL-CI

^b Initial Notification is due 120 days after the effective date of the rule or 120 days after you become subject to the rule

^a This is an example of the type of information that must be submitted to fulfill the Initial Notification of Applicability Status requirement of 40 CFR 63, subpart ZZZZ. You may submit the information in another form or format, or you may use this form.

Example^a

Owner name/title: CITY OF RUSSELL
Owner/company address: 133 WEST 8 TH STREET, PO BOX 112, RUSSELL, KANSAS 67665
Owner telephone number: 785-483-6311
Owner email address (if available):
If the Operator information is different from the Owner, please provide the following:
Operator name/title: TERRY MORSE- ELECTRIC PRODUCTION SUPT.
Operator telephone number: 785-483-7118
Operator email address (if available): tmorse@russellcity.org
I hereby certify that the information presented herein is correct to the best of my knowledge.
<u>Terry Monson</u> 8/26/2010 (Date)
TERRY MORSE- ELEC. PROD. SUPT. (785) 483-7118 (Name/title) (Telephone No.)